

## RCRAInfo CM&amp;E EVALUATION – VIOLATION FORM

<b>*EPA ID Number</b>		PAD002300580			<b>EIN</b>		
<b>Handler Name</b>		Graphic Arts Inc.					
<b>Street</b>		4100 Chestnut Street					
<b>City</b>		Philadelphia	<b>State</b>	PA	<b>Zip Code</b>	19104	
<b>Actual Generator Status</b> <i>Check only if different from Notified Status.</i>			LQG <input type="checkbox"/> SQG <input checked="" type="checkbox"/>		CESQG <input type="checkbox"/> Closed <input type="checkbox"/> Non-Handler <input type="checkbox"/>		
<b>Universe Change Required?</b> <i>(Generator Status Change Required)</i>			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Universe Change Section (on reverse side of this form).				
<b>RCRA Non-Notifier?</b>			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Handler Section (on reverse side of this form).				
<b>Other Facility Information Changes?</b>			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> If YES, complete the Handler Section (on reverse side of this form).				
<b>*EVALUATION</b>		<input checked="" type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete		<b>You must provide an Evaluation Identifier (also known as the Sequence Number).</b>			
<b>*Evaluation Identifier</b>	<b>*Type</b>	<b>*Evaluation Start Date (mm/dd/yyyy)</b>		<b>*Agency</b>	<b>Responsible Person</b>	<b>Suborganization</b>	
3001	CEI	8/3/2006		S	TPT	PADEP W M	
<b>Day Zero (mm/dd/yyyy):</b> <i>You need to specify Day Zero for all evaluation types except CDI, CSE, FUI, SNN, and SNN, otherwise it defaults to Evaluation Start Date. For CDI, CSE, FUI, and SNN evaluations, you must select a previous CEI Start Date for the Day Zero. SNN evaluation type does not require a Day Zero.</i>				8/3/2006		<b>Reclassified SV Date:</b> <i>Only applicable for SNN evaluation type as appropriate.</i>	
<b>Notes:</b> One pending violation as a result of this inspection.							
<b>Evaluation Indicator Field (Check all that apply)</b>							
<input checked="" type="checkbox"/> Citizen Complaint <input type="checkbox"/> Multimedia Inspection <input type="checkbox"/> Sampling <input type="checkbox"/> Not Subtitle C							
<b>Focused Coverage Areas (Use Only for Evaluation Type FCI)</b>							
<b>Regulation-Specific FCI</b>							
BIF <input type="checkbox"/> CCI <input type="checkbox"/> CFI <input type="checkbox"/> INC <input type="checkbox"/> LDR <input type="checkbox"/> PTB <input type="checkbox"/> PTX <input type="checkbox"/>							
THI <input type="checkbox"/> UIC <input type="checkbox"/> UOI <input type="checkbox"/> UWR <input type="checkbox"/> OTHER (specify):							
<b>Routine/Standardized FCI</b>							
CAR <input type="checkbox"/> CPC <input type="checkbox"/> DOS <input type="checkbox"/> EMR <input type="checkbox"/> IEI <input type="checkbox"/> ISI <input type="checkbox"/> RTI <input type="checkbox"/>							
<b>Does this Evaluation Add/Update/Delete a Violation?</b>				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		<b>If Yes, fill in the Violations Section(s) on page 2 of this form.</b>	
<b>Does this Evaluation link to a Commitment?</b>				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<b>If Yes, please use the RCRAInfo 3007 Information Requests and Commitments Form.</b>	
<b>Does this Evaluation link to a 3007 Request?</b>				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<b>If Yes, please use the RCRAInfo 3007 Information Requests and Commitments Form.</b>	
<b>OUTSTANDING VIOLATIONS COVERED BY ABOVE EVALUATION?</b>				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		<b>If Yes, fill in information below.</b>	
<b>*Seq. No.</b>	<b>*Violation Type</b>	<b>*Agency</b>	<b>*Regulation Citation (Type + Citation)</b> (ex. FR 262.1)			<b>*Date Determined (mm/dd/yyyy)</b>	

\*Required Fields

JR

<b>EPA ID Number</b>			<b>Handler Name</b>		
PAD002300580			Graphic Arts Inc.		
<b>VIOLATIONS SECTION</b> (Additional Violations can be added/updated/deleted using the RCRAInfo CM&E Additional Violations Form)					
<b>VIOLATION</b> <input checked="" type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete					<b>Link to Above Evaluation</b> <input checked="" type="checkbox"/>
<b>Seq. No</b>	<b>Violation Type</b>	<b>Agency</b>	<b>Determined Date (mm/dd/yyyy)</b>	<b>Return to Compliance (RTC) Qualifier</b>	<b>Actual RTC Date (mm/dd/yyyy)</b>
	262.C	S	8/3/2006	<input type="checkbox"/> A RTC Qualifier is required if entering an Actual RTC Date.	
<b>Notes:</b> This is a pending violation that will be followed up on.					
<b>LINK CITATIONS TO ABOVE VIOLATION?</b>			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	<b>If Yes, fill in information below</b>	
<b>Citation Type</b>		<b>Citation</b>		<b>Citation Type</b>	
FR		262.34(d)(5)(ii)			
<b>VIOLATION</b> <input type="checkbox"/> Add <input type="checkbox"/> Update <input type="checkbox"/> Delete					<b>Link to Above Evaluation</b> <input type="checkbox"/>
<b>Seq. No</b>	<b>Violation Type</b>	<b>Agency</b>	<b>Determined Date (mm/dd/yyyy)</b>	<b>Return to Compliance (RTC) Qualifier</b>	<b>Actual RTC Date (mm/dd/yyyy)</b>
				<input type="checkbox"/> A RTC Qualifier is required if entering an Actual RTC Date.	
<b>Notes:</b>					
<b>LINK CITATIONS TO ABOVE VIOLATION?</b>			YES <input type="checkbox"/> NO <input type="checkbox"/>	<b>If Yes, fill in information below</b>	
<b>Citation Type</b>		<b>Citation</b>		<b>Citation Type</b>	
<b>HANDLER SECTION (Fill out if RCRA Non-Notifier)</b>					
<b>Handler Name</b>		<b>Contact</b>			
<b>Street</b>					
<b>City</b>	<b>State</b>	<b>Zip Code</b>			
<b>County</b>					
<b>UNIVERSE CHANGE SECTION (Fill out if Universe Change Required)</b>					
<b>i. Indicate the Facility's current Universe(s):</b>					
<b>ii. Indicate the new RCRAInfo Generator Universe:</b> <i>Note: All TSD activity changes must be handled by the IOR and cannot be made using this form.</i>			LQG <input type="checkbox"/> Non-Handler <input type="checkbox"/>	SQG <input type="checkbox"/> Closed <input type="checkbox"/>	CEG <input type="checkbox"/>
<b>iii. Indicate the new transporter status:</b> (Only fill out if the facility requires a transporter status change)		<b>Transporter</b> <input type="checkbox"/> <i>If the transporter box is checked, you must check at least one mode of transportation below:</i> <input type="checkbox"/> Air <input type="checkbox"/> Water <input type="checkbox"/> Rail <input type="checkbox"/> Other <input type="checkbox"/> Highway		<b>Non-Transporter</b> <input type="checkbox"/> Check non-transporter if the facility is currently listed in RCRAInfo as a transporter AND no longer transports hazardous waste.	

\*Required Fields



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

# 1554771  
Inspection Date 8/3/06

Time Start 10:14

Time Finish 2:14

## HAZARDOUS WASTE INSPECTION REPORT

☐ GENERATOR☒ S Q GENERATORCompany name GRAPHIC ARTS INCEPA I.D. Number PAD002300580 Employer I.D. Number (EIN) \_\_\_\_\_Site Address 4100 Chestnut St.County Philadelphia Municipality Philadelphia Zip 19104Name of Inspector Tom Taggart, Laura JohnsonName & Title of Responsible Official David Salter, Chief operating officerPerson Interviewed David Salter Telephone (215) 382-5500 x 217

Mailing Address (if different from above) \_\_\_\_\_

Amount of Hazardous Waste Generated per Month: 2903 Pounds \_\_\_\_\_ Kgs \_\_\_\_\_

## 1. Site Characterization:

STORAGE: ☒ Container ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad Other \_\_\_\_\_PBR: ☐ Neutralization/WWTP ☐ Reclaim Other \_\_\_\_\_GENERATOR TREATMENT ☐ Containers ☐ Tanks ☐ Containment Bldg. ☐ Drip Pad2. Universal Waste: ☐ Large Quantity Handler ☐ Small Quantity Handler

Universal Waste Types \_\_\_\_\_

## 3. Hazardous Waste Transporters:

Transporter Name St. Joseph Motor Lines License Number PAD987358587

Transporter Name \_\_\_\_\_ License Number \_\_\_\_\_

Transporter Name \_\_\_\_\_ License Number \_\_\_\_\_

## 4. Types of hazardous waste generated and destination facility (location &amp; type).

Waste Code	Waste Description	Destination Facility
D001	waste Flammable Liquid	Giant Resource Recovery, Sumter Inc.
		755 Industrial Rd.
		PO Box 1755
		Sumter, SC.
		29150

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

## HAZARDOUS WASTE INSPECTION REPORT GENERATORS -- SMALL QUANTITY GENERATORS

Site Name GRAPHIC ARTS INC ID Number PAD002300550 Date 8/3/06  
 1 - No Violation Observed    2 - Not Applicable    3 - Not Determined    4 - Non Compliance

**STATUS**

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED. CIT. 40 CFR	LINE NO.
X				Hazardous waste determination performed on all waste streams	262a.10	262.11	H001
X				Identification Number	262a.10	262.12	H002
X				Authorized transporters only	262a.10	262.12(c)	H003
X				Subsequent notification requirements met	262a.12(b)		H004
X				Proper manifest used	262a.10	262.21	H005
X				Manifests filled out correctly and completely	262a.20		H006
X				Manifests signed and routed properly	262a.23(a)	262.23	H007
	X			Generator waste accumulated on site for 90 days or less	262a.10	262.34(a)	H008
X				SQG waste accumulated on site for 180 days max unless 200 mile distance rule applies - 270 days	262a.10	262.34(e)(f)	H009
X				SQG waste accumulated on-site never exceeds 6000 kg	262a.10	262.34(e)(f)	H010
X				Satellite accumulation requirements complied with	262a.10	262.34(c)	H011
X				Personnel training program per 265.16 complied with	262a.10	262.34(a)(4) 262.34(d)	H012
X				Manifest exception and biennial reports retained for 3 years	262a.10	262.40(a)(b)	H013
X				Specified records retained for three years	262a.10	262.40(c)	H014
	X			Biennial reports submitted to the Department (LQG only)	262a.41	262.41	H015
X				Exception reporting procedures followed	262a.42	262.42	H016
X				Spill reporting procedures followed	262a.10	262.34(d)	H017
		X		PPC plan developed and implemented	262a.10	262.34(a)	H018
X				Special requirements followed for international shipments	262a.10	262.50 262.60	H019
	X			Source reduction strategy prepared and available (LQG only)	262a.100		H020
X				Excluded waste complies with exclusionary requirements	261a.4	261.4	H021

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

**HAZARDOUS WASTE INSPECTION REPORT  
GENERATORS -- SMALL QUANTITY GENERATORS  
FACILITY SPECIFICS**

Site Name GRAPHIC ARTS INC ID Number PA0030580 Date 8/3/06

1 - No Violation Observed    2 - Not Applicable    3 - Not Determined    4 - Non Compliance

**STATUS**

1	2	3	4	REQUIREMENT	PA CIT. 25 PA Code	FED CIT. 40 CFR	LINE NO.
				<b>CONTAINERS</b> (Subchapter I)			
X				Containers managed in compliance with 40 CFR Part 265 Subpart I and 25 PA Code Chapter 265a Subchapter I	262a.10	262.34	H025
X				Containers of hazardous waste in good condition	265a.1	265.171	H026
X				Containers and stored waste compatible	265a.1	265.172	H027
X				Containers kept closed except during addition or removal of wastes	265a.1	265.173(a)	H028
X				Containers managed to prevent leaks	265a.1	265.173(b)	H029
X				Container configuration and spacing insures safe management and access for inspection purposes and emergency equipment	265a.173		H030
X				Container storage areas inspected at least weekly	265a.1	265.174	H031
X				Special requirements for ignitable or reactive and incompatible waste complied with	265a.1	265.176-177	H032
X				Proper containment and collection systems in place	265a.179		H033
X				Air emission standards complied with (AA, BB, CC)	265a.1	265.178	H034
X				Containers clearly marked with accumulation date and visible for inspection	262a.10	262.34(a)(2)	H035
X				Containers labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H036
X				Containers labeled accurately identify contents	SWMA 6018.403(b) (2)		H037

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

**HAZARDOUS WASTE INSPECTION REPORT  
GENERATORS -- SMALL QUANTITY GENERATORS  
FACILITY SPECIFICS**

Site Name Graphic Arts Inc ID Number PA00030550 Date 8/5/06  
1 - No Violation Observed    2 - Not Applicable    3 - Not Determined    4 - Non Compliance

**STATUS**

1	2	3	4	REQUIREMENT	PA CIT. 25 PA CODE	FED CIT. 40 CFR	LINE NO.
				<b>LQG TANKS</b> (Subchapter J)			
	X			Tanks labeled "Hazardous Waste"	262a.10	262.34(a)(3)	H040
				Written certification by registered professional engineer for proper tank (system) design and installation on file	262a.10	265.192(a)	H041
				Secondary containment provided for tanks (systems) as required	265a.193	265.193	H042
				Tanks (systems) managed to prevent rupture, leak, corrode or fail	265a.1	265.194	H043
				Tanks labeled to accurately identify contents	265a.194		H044
				Required inspections completed and documented in operating log	265a.195	265.195	H045
				Release reported to Department within 24 hours, unless exempted	265a.1	265.196	H046
				Special requirements for ignitable and reactive wastes followed	265a.1	265.198	H047
				Special small quantity generator requirements	265a.1	265.201	H048
				<b>SQG TANKS</b>			
	X			Waste contents compatible with tank	265a.1	265.201(b)(2)	H051
				Uncovered tanks operated with 2 feet of freeboard or equivalent containment capacity	265a.1	265.201(b)(3)	H052
				If continuously fed, tank has method to stop inflow	265a.1	265.201(b)(4)	H053
				Daily tank inspection requirements complied with	265a.1	265.201(c)(1-3)	H054
				Weekly tank inspection requirements complied with	265a.1	265.201(c)(4,5)	H055
				All waste removed at closure	265a.1	265.201(d)	H056
				Special requirements for ignitable or reactive waste complied with	265a.1	265.201(e)(1)	H057
				Covered tank buffer zone requirements complied with	265a.1	265.201(e)(2)	H058
				Incompatible waste requirements met	265a.1	265.201(f)	H059

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
BUREAU OF WASTE MANAGEMENT

**HAZARDOUS WASTE INSPECTION REPORT  
GENERATORS -- SMALL QUANTITY GENERATORS  
FACILITY SPECIFICS**

Site Name GRAPHIC ARTS INC ID Number PA000300580 Date 8/3/06  
 1 - No Violation Observed    2 - Not Applicable    3 - Not Determined    4 - Non Compliance

**STATUS**

1	2	3	4	REQUIREMENT	PA CIT. 25 PA CODE	FED CIT. 40 CFR	LINE NO.
				<b>Containment Buildings</b> (Subchapter T)			
	X			Building completely enclosed to prevent exposure to the elements	265a.1	265.1101(a)(1)	H061
				Meets special requirements if liquids present	265a.1	265.1101(b)	H062
				Primary barrier free of significant gaps, cracks and deterioration	265a.1	265.1101(c)(1) (i)	H063
				Level of hazardous waste within unit is below containment walls	265a.1	265.1101(c)(1) (ii)	H064
				Tracking of waste out of unit by equipment or personnel prevented	265a.1	265.1101(c)(1) (iii)	H065
				No visible dust emissions at doors, windows, vents, etc.	265a.1	265.1101(c)(1) (iv)	H066
				Professional engineer's certification placed in operating record	265a.1	265.1101(c)(2)	H067
	✓			Required inspections performed and logged in operating record	265a.1	265.1101(c)(4)	H068
				<b>Drip Pads</b> (Subchapter S)			
	X			Engineer's certification of existing drip pads on file	265a.1	265.441(a)	H069
				Drip pad meets 265.443 design & operating standards	265a.1	265.443	H070
				(a) nonearthen, sloped construction with berm to channel associated drippage to collection system	265a.1	265.443(a)	H071
				(b) Has synthetic liner below the pad with properly constructed leak detection system	265a.1	265.443(b)	H072
				Drip pads & collection system maintained to prevent deterioration	265a.1	265.443(c)	H073
				Drip pads & collection systems designed to prevent run-off	265a.1	265.443(d)	H074
				Run-on/run-off control system maintained unless pad protected by a structure	265a.1	265.443(e)	H075
				Release reporting requirements met	265a.1	265.443(m)	H076
	✓			Drip pads inspected weekly and after storms when in operation	265a.1	265.444(b)	H077

Commonwealth of Pennsylvania  
Department of Environmental Protection  
Bureau of Land Recycling & Waste Management

## Inspection Report Comments

Date of Inspection 8/3/2006 Identification Number PAD002300580

Company/Facility/Site Graphic Arts Inc.

A routine hazardous waste SQG inspection of Chemson Inc., located at 4100 Chestnut Street, Philadelphia, PA 19104, was conducted on August 3, 2006, by Mr. Thomas P. Taggart of the Pennsylvania Department of Environmental Protection ("Department"), with Laura Johnson, DEP inspector, in attendance. R. David Salter, Chief Operating Officer, was present for the facility. The following observations were noted:

1. Graphic Arts Inc. is a printing/lithographing corporation that produces a wide variety of material for many different markets. They are currently listed with the EPA as a Small Quantity Generator (SQG) with the ID# PAD002300580.
2. Graphic Arts Inc. uses three printing presses in the production of their material. Two of the three printing presses are Heidelberg *Speedmaster* presses; one is a 1995 model that funnels the waste ink and solvent (from cleaning) into a main collection pipe which drains into a plastic satellite accumulation drum, and the other is a 2004 model that recycles the waste ink and solvent in a cleaning/distillation unit. The 2004 model Heidelberg *Speedmaster* can recycle the solvent several times before the solvent becomes too dirty. Internal controls in the press determine when the solvent is no longer usable and signals to the facility's workers that the distillation unit needs to be emptied. The unit is emptied into a satellite accumulation drum that sits next to the press. The oldest of the presses, which sits on the production floor closest to the 1<sup>st</sup> floor offices, collects the waste ink and solvent in plastic containers that sit underneath the printing heads on one side of the machine. The plastic containers are collected and emptied into the satellite accumulation drum that sits near the 2004 press. Graphic Arts Inc. is reminded that all satellite accumulation area drums should remain properly closed except during addition of waste.
3. When the satellite accumulation drums are full, they are moved off the production floor to the hazardous waste storage shed located in the parking lot behind the facility. The door of the storage shed was locked and properly labeled with a hazardous waste sticker at the time of the inspection. The weekly inspection log was inside of the storage area. Inspections are being

*This inspection report is notice of the findings of an inspection conducted by a representative of the Department. This report is formal notification of any violations observed during the inspection. Additional notification of violations may be issued concerning either violations noted herein, or other violations identified as a result of review of laboratory analyses or Department records.*

*This report does not constitute an order or other appealable action of the Department. Nothing contained herein shall be deemed to grant or imply immunity from legal action for any violation noted herein.*

*Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.*

Person interviewed (signature) \_\_\_\_\_

Date \_\_\_\_\_

Inspector (signature) \_\_\_\_\_

*Thomas P. Taggart*

Date 8/3/2006



Commonwealth of Pennsylvania  
Department of Environmental Protection  
Bureau of Land Recycling & Waste Management

**Inspection Report Comments**Date of Inspection 8/3/2006 Identification Number PAD002300580Company/Facility/Site Graphic Arts Inc.

performed on a weekly basis with the last two inspections done on 7/24/2006 and 8/2/2006. Sean Shelby currently performs the weekly inspections and also moves the full hazardous waste drums out to the storage area. There were no hazardous waste drums being stored in the storage area at the time of the inspection.

4. The training records for the facility were reviewed. Graphic Arts Inc. has a video training program that handlers of their hazardous waste watch. The video covers the appropriate and necessary RCRA regulations including proper handling and care of storage drums and containers. Sean Shelby and Justin Deamer received this training on 7/26 and 7/28/2006. The facility should conduct this training on a yearly basis, and keep records of the training for 3 years after the training.
5. No PPC plan was available at the time of the inspection. Mr. Salter has been developing a plan that incorporates the proper emergency contact numbers and spill response instructions, but this plan was not available at the time of the inspection. The plan should incorporate all the required emergency contact numbers, a facility map/layout plan that indicates the location of fire extinguishers and emergency exits, and proper spill control and clean-up steps.
6. The facility's manifests were reviewed. Hazardous waste is currently removed by St. Joseph Motor Lines (PA-AH 0390) and transported to a primary facility in South Carolina (SCD036275626). The most recent hazardous waste shipment was on 7/25/2006, which was for 6600 lbs of waste flammable liquid (petroleum naphtha, D001 waste) that mainly consists of waste solvent and ink collected from the operating the printing presses.

No violations were found as a result of this inspection; it is not determined at this time whether the facility has developed a PPC (or equivalent emergency response) plan. A follow-up inspection will be conducted within four (4) weeks to determine if a plan has been developed.

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*Signature by the person interviewed does not necessarily imply concurrence with the findings on this report, but does acknowledge that the person was shown the report or that a copy was left with the person.*

Person interviewed (signature) R.D. Salter Date 8/3/2006  
Inspector (signature) John P. Toppert Date 8/3/2006  
Page 7 of 7



# South Carolina Department of Health and Environmental Control

Bureau of Solid & Hazardous Waste Mgt.

2600 Bull Street, Columbia, SC 29201

Phone: (803) 896-4000

Emergency & Holidays: (803) 253-6488

189937 PLEASE PRINT or TYPE (Form designed for use on elite [12-pitch] typewriter)

Form Approved. OMB No. 2050-0039 Expires 9-30-99

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's U.S. EPA ID No. PA10002300380	Manifest Document No. 45805	2. Page 1 of 1	Information in the shaded areas is not required by Federal law, but is by State law.	
3. Generator's Name and Mailing Address GRAPHIC ARTS INC 4100 CHESTNUT ST PHILADELPHIA PA 19104 Attention: RICH NIMAN				A. State Manifest Document Number		
4. Generator's Phone (215) 382-5500				B. State Generator's ID		
5. Transporter 1 Company Name St. Joseph Motor Lines				C. State Transporter's ID MAAH0390		
6. U.S. EPA ID Number PA11987358587				D. Transporter's Phone 800-221-2565		
7. Transporter 2 Company Name				E. State Transporter's ID		
8. U.S. EPA ID Number				F. Transporter's Phone		
9. Designated Facility Name and Site Address GIANT RESOURCE RECOVERY SUMTER, INC 755 INDUSTRIAL ROAD PO BOX 1755 SUMTER, SC 29150				G. State Facility's ID		
10. U.S. EPA ID Number SCD036275626				H. Facility's Phone 803-773-1400		
11. U.S. Dot Description (including Proper Shipping Name, Hazard Class, and ID Number) a. WASTE FLAMMABLE LIQUID, N.O.S. (PETROLEUM NAPHTHA), 3, UN1993, PGH			12. Containers No. Type 112	13. Total Quantity 16.690	14. Unit Wt/Vol	
b.						
c.						
d.						
A. BR 300-0000 D001			15. Handling Codes for Wastes Listed Above			
B.						
C.						
D.						
15. Special Handling Instructions and Additional Information Pick up site: 4100 CHESTNUT ST PHILADELPHIA, PA 19104 EMERGENCY CONTACT NUMBER 1-803-773-1400 If undeliverable, contact generator			Public reporting burden for this collection of information is estimated to average .37 minutes for generators, 15 minutes for transporters, and 10 minutes for treatment storage and disposal facilities. This includes time for reviewing instructions, gathering data, and completing and reviewing the form. Send comments regarding the burden estimate, including suggestions for reducing this burden, to Chief, Information Policy Branch, PM-223, U.S. Environmental Protection Agency, 401 M St., S.W., Washington, D.C. 20460; and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and the laws of the State of South Carolina. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.						
Printed/Typed Name RICH NIMAN		Signature <i>[Signature]</i>		Month Day Year 		
17. Transporter 1 Acknowledgement of Receipt of Materials						
Printed/Type Name Ron H Line		Signature <i>[Signature]</i>		Month Day Year 10/7/23/26		
18. Transporter 2 Acknowledgement of Receipt of Materials						
Printed/Typed Name		Signature		Month Day Year 		
19. Discrepancy Indication Space a. [ ] lbs. c. [ ] lbs. b. [ ] lbs. d. [ ] lbs.						
20. Facility Owner or Operator; Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name		Signature		Month Day Year 		



United States Environmental Protection Agency  
Washington, DC 20460

# Notification of Hazardous Waste Activity

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (*Section 3010 of the Resource Conservation and Recovery Act*).

**For Official Use Only**

## Comments

[illegible]

Installation's EPA ID Number													Approved			Date Received (yr. mo. day)			101 Phila.					
C	P	A	1	0	0	2	3	0	0	5	8	0	T/A	C				8		8	0	3	0	8
F																								

### I. Name of Installation

[illegible]

## II. Installation Mailing Address

## Street or P.O. Box

[illegible]

## City or Town

## State

## ZIP Code

[illegible]

### III. Location of Installation

## Street or Route Number

[illegible]

## City or Town

## State

## ZIP Code

[illegible]

#### IV. Installation Contact

## Name and Title (last, first, and job title)

## Phone Number (area code and number) \_\_\_\_\_

C	D	A	V	E	S	A	L	T	E	R	M	A	N	G	R	2	1	5	3	8	2	5	5	0	0
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## V. Ownership

**A. Name of Installation's Legal Owner**

## B. Type of Ownership (enter code)

C	R	G	R	A	P	H	I	C	A	R	T	S	I	N	C							D
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**VI. Type of Regulated Waste Activity** (Mark 'X' in the appropriate boxes. Refer to instructions.)

### A. Hazardous Waste Activity

### B. Used Oil Fuel Activities

<input checked="" type="checkbox"/> 1a. Generator <input type="checkbox"/> 2. Transporter <input type="checkbox"/> 3. Treater/Storer/Disposer <input type="checkbox"/> 4. Underground Injection <input type="checkbox"/> 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner	<input type="checkbox"/> 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below) <input type="checkbox"/> a. Generator Marketing to Burner <input type="checkbox"/> b. Other Marketer <input type="checkbox"/> c. Burner <input type="checkbox"/> 7. Specification Used Oil Fuel Marketer (i.e. On site Burner) Who First Claims the Oil Meets the Specification
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**VII. Waste Fuel Burning: Type of Combustion Device** (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler      ☐ B. Industrial Boiler      ☐ C. Industrial Furnace

**VIII. Mode of Transportation** *(transporters only — enter 'X' in the appropriate box(es))*

☐ A. Air    ☐ B. Rail    ☒ C. Highway    ☐ D. Water    ☐ E. Other (specify) \_\_\_\_\_

### IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.

[illegible]

ID — For Official Use Only														
C													T/A	C
W														1

# X. Description of Hazardous Wastes (continued from front)

**A. Hazardous Wastes from Nonspecific Sources.** Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
NA					
7	8	9	10	11	12

**B. Hazardous Wastes from Specific Sources.** Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
NA					
19	20	21	22	23	24
25	26	27	28	29	30

**C. Commercial Chemical Product Hazardous Wastes.** Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
NA					
37	38	39	40	41	42
43	44	45	46	47	48

**D. Listed Infectious Wastes.** Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
NA					

**E. Characteristics of Nonlisted Hazardous Wastes.** Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

- ☒ 1. Ignitable (D001) *code 3-8-88*
☐ 2. Corrosive (D002)
 ☐ 3. Reactive (D003)
 ☐ 4. Toxic (D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature <i>R. David Sutter</i>	Name and Official Title (type or print) <i>R. David Sutter Asst Production Manager</i>	Date Signed <i>3/30/88</i>
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U.S. ENVIRONMENTAL PROTECTION AGENCY  
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

**INSTRUCTIONS:** If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

PLEASE PLACE LABEL IN THIS SPACE

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER										APPROVED										DATE RECEIVED (yr., mo., & day)									
PAD 0023005803																													

I. NAME OF INSTALLATION

GRAPHIC ARTS INC

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

4100 CHESTNUT ST

CITY OR TOWN

PHILADELPHIA

ST.

ZIP CODE

PA 19104

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

Same

CITY OR TOWN

Same

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

B. TYPE OF OWNERSHIP (enter the appropriate letter into box)

F = FEDERAL  
M = NON-FEDERAL

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☐ A. GENERATION ☐ B. TRANSPORTATION (complete item VII)  
☐ C. TREAT/STORE/DISPOSE ☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR ☐ B. RAIL ☐ C. HIGHWAY ☐ D. WATER ☐ E. OTHER (specify): 2

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your Installation's EPA I.D. Number in the space provided below.

☐ A. FIRST NOTIFICATION ☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

Sm  
Gen

GRAPHIC ARTS, INCORPORATED



4100 CHESTNUT STREET  
PHILADELPHIA, PA. 19104  
EVergreen 2-5500

*Lithographers*

PAD002300580

GRAPHIC ARTS INCORPORATED  
4100 CHESTNUT ST  
PHILADELPHIA, PA 19104

4100 CHESTNUT ST  
PHILADELPHIA, PA 19104

Our company requests an exclusion from this program  
under paragraph 261.5 (a).

*Fred W. Binder*

Fred W. Binder  
President